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PTO/SB/05 (03-01)

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.		501.42842X00			
		First Inventor		ASUMA, HIROAKI			
		Title	LIQUID CRYSTAL DISPLAY DEVICE				
		Express Mail Label No.					
<b>APPLICATION ELEMENTS</b>				<b>ADDRESS TO:</b>			
SEE MPEP chapter 600 concerning utility patent application contents.				Assistant Commissioner for Patents Box Patent Application Washington, DC 20231			
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></p><p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p><p>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages: 36]</span> <small>(preferred arrangement set forth below)</small> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R &amp; D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p><p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Pages: 11]</span></p><p>5. Oath or Declaration <span style="float: right;">[Total Pages: 4]</span> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p><p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p></div><div style="width: 48%;"><p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p><p>8. Nucleotide and/or Amino Acid Sequence Submission <i>if applicable, all necessary</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p></div></div>							
<b>ACCOMPANYING APPLICATION PARTS</b>							
<p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; documents(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document <small>(if applicable)</small></p> <p>12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Citations Statement (IDS)/PTO-1449</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment w/ Substitute Specification</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p> <p>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 <small>(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</small></p> <p>17. <input checked="" type="checkbox"/> Other: <b>Credit Card Payment Form, Figs. 1-17</b></p>							
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p style="text-align: center;"><input type="checkbox"/> Continuation    <input type="checkbox"/> Divisional    <input type="checkbox"/> Continuation-in-part (CIP)    of prior application No.:</p> <p>Prior application information: Examiner: _____ Group Art Unit: _____</p> <p><b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>							
<b>19. CORRESPONDENCE ADDRESS</b>							
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<small>(Insert Customer No. or Attach bar code label here)</small>							
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Address							
City		State		Zip Code			
Country		Telephone	(703) 312-6600	Fax	(703) 312-6666		
Name	Melvin Kraus	Registration No. (Attorney/Agent)		22,466			
Signature		Date	July 24, 2003				

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="font-size: small; margin: 5px 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p>				<b>Complete if Known</b>																																																																																																																																																																																																																																							
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<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 01-2135 Deposit Account Name Antonelli, Terry, Stout & Kraus, LLP The Commissioner authorized to: (check all that apply) <input type="checkbox"/> Charge fees indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fees indicated below, except for the filing fee to the above-identified deposit account.				Attorney Docket No.		501.42842X00																																																																																																																																																																																																																																					
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